

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

10/568601

FILING DATE
FEB 14 2006

APPLICANT(S)

CLAIMS

| CLAIMS | | | | | | | |
|--------------|------|------------------------------------|------|------------------------------------|------|------|------|
| AS FILED | | AFTER 1 ST AMENDMENT | | AFTER 2 ND AMENDMENT | | | |
| IND. | DEP. | IND. | DEP. | IND. | DEP. | IND. | DEP. |
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| TOTAL IND. | | | 2 | | | | |
| TOTAL DEP. | | 18 | | | | | |
| TOTAL CLAIMS | | 20 | | | | | |